

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 28 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003-2005

DOCUMENT # P01000071468

1. Corporation Name

SUNSHINE Mortgage & Investments, Inc

2. Principal Office Address

4402 North Melton

Suite/Apt. #, etc.

110

City & State

Tampa, FL

Zip

33614

Country

Hillsborough

3. Mailing Office Address

2655 Ulmestad Rd

Suite/Apt. #, etc.

188

City & State

Clearwater, FL

Zip

33762

Country

Pinellas

UUUU49277030

03/28/05--01003--005 **458.75

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

14-2092767

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Heather E. Zeller

Street Address (P.O. Box Number is Not Acceptable)

4402 North Melton

Suite, Apt. #, Etc.

Suite 110

City

Tampa

State

FL

Zip Code

33614

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Heather E. Zeller

Date 3/24/05

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES. CEO	HEATHER E. Zeller	4402 North Melton #110 TAMPA, FL 33614	TAMPA, FL 33614
D	Roland L Martino	4402 North Melton #110 TAMPA, FL 33614	TAMPA, FL 33614

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Heather E. Zeller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/24/05

Daytime Phone #

CR2E081 (01/05)